

ATTORNEY'S DOCKET NUMBER P02,0086

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

names are liste	d below) of the su	bject matter which is claimed and for	which a patent is sought on the i	nvention entitled:	
	"COMPRES	SION AND DECOMPRESSION CO	DING SCHEME AND APPARATU	JS"	
the specificatio	n of which (check	only one item below):			
0	is attached hereto.				
0	was filed as United States application Serial No				
	on,				
	and was amend	ded			
	on	<u> </u>	(if applicable	).	
	was filed as PC	T international application			
	Number	PCT/SE00/01744			
	on	7 September 2000		•	
	and was amend	ded under PCT Article 19			
	on		(if applicable	).	
amended by an	y amendment refe	d and understand the contest of the erred to above.  e information which is material to the		-	
37, Code of Fed	deral Regulations,	§1.56(a).	e examination of this application if	raccordance with ritle	
inventor's certification international ap	icate or of any PC below and have al oplication(s) design	efits under Title 35, United States C T international application(s) design so identified below any foreign appli nating at least one country other that be before that of the application(s) of	ating at least one country other the cation(s) for patent or inventor's continued in the United States of America file	an the United States of ertificate or any PCT	
		323000 for 10 C+10000 (2022)		•	
PRIOR FOREIG	GN/PCT APPLICA	TION(S) AND ANY PRIORITY CLA	IMS UNDER 35 U.S.C. 119:		
COUNTRY (if PCT indicate "PCT")		APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119	
Sweden		9903191-6	8 September 1999	■ YES □ NO	
				□ YES □ NO	
				□YES □NO	
				□YES □NO	
			_	□ YES □ NO	

## ©mbined Declaration For Patent Application and Power of Attorney (Continued)

(Includes Reference to PCT Interna

Applications)

ATTORNEY'S DOCKET
NO.
P02,0086

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject mater of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, Untied States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

## PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS				STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. APPLICATION NUMBER		PATE NTED	PENDING	ABANDO NED	
	····					
					•	
PCT APPLICATIONS D	PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO	PCT FILING	U.S. SERIAL NUMBERS ASSIGNED (if any)				
	DATE					
	· · ·					

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected herewith.

And I hereby appoint all Attorneys identified by the United States Patent & Trademark Office Customer Number 26574, who are all members of the firm of Schiff, Hardin & Waite.

Send Correspondence to: SCHIFF, HARDIN & WAITE Patent Department 6600 Floor Sears Tower, Chicago, Illinois 60606 Customer Number 26574				Direct Telephone Calls to: 312/258-5790
	FULL NAME OF INVENTOR	FAMILY NAME LIDMAN	FIRST GIVEN NAME JOHAN	SECOND GIVEN NAME
2 0 1	RESIDENCE & CITIZENSHIP	CITY STOCKHOLM	STATE OR FOREIGN COUNTRY SWEDEN	COUNTRY OF CITIZENSHIP SWEDEN
	POST OFFICE ADDRESS	POST OFFICE ADDRESS KRUKMAKARGATAN 63 kv,	CITY S117-41 STOCKHOLM	STATE & ZIP CODE/COUNTRY S117-41STOCKHOLM, SWEDEN

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203	
DATE	DATE	DATE	